

WAUKESHA COUNTY DEPARTMENT OF PARKS AND LAND USE
PLANNING AND ZONING DIVISION
1320 PEWAUKEE ROAD ROOM 230
WAUKESHA, WISCONSIN 53188
(262) 548-7790

Website: www.waukeshacounty.gov

**PETITION TO AMEND THE MAP OF THE COUNTY ZONING CODE and/or
COUNTY SHORELAND AND FLOODLAND PROTECTION ORDINANCE**

Fee Pd. _____ Receipt No. _____ Received by _____ Petition No. _____
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HONORABLE TOWN BOARD OF SUPERVISORS
TOWN/CITY/VILLAGE OF _____ WAUKESHA COUNTY, WISCONSIN

I/We, the undersigned, owner of the property described below, located in the Town/City/Village of _____ do hereby petition to amend the MAP of the County Zoning Code and/or the County Shoreland and Floodland Protection Ordinance in the following manner:

Present Zoning Classification(s): _____

Proposed Zoning Classification(s): _____

Present Use(s) of the subject property: _____

Proposed Use(s) of the subject property: _____

Tax Key No(s). _____

Legal Description of the subject property: _____

Reasons/Conditions which justify a change in the zoning (attach additional pages, if necessary):

Owner: _____ Petitioner: _____

Daytime Phone No.(_____) _____ Daytime Phone No.(_____) _____

The following information must be submitted with this application:

1. Three (3) copies of an accurate site plan/map or plat of survey (preferred) drawn **to scale**, showing the location of the proposed zoning district boundaries, the location and use of the buildings on the subject property, and the use of all properties within 300 feet of the subject property.
2. Names and mailing addresses of all property owners whose land lies within 300 feet of the subject property referenced above (see attachment).
3. A filing fee payable to the Waukesha County Department of Parks and Land Use (inquire as to the current fee amount).

Note: Submittal, and subsequent review, of this application may include a site inspection.

The undersigned petitioner/owner hereby certifies that all of the above statements, information and attachments contained herein are true and accurate to the best of his or her knowledge and belief.

Signature of Owner/Petitioner _____ Date of Filing _____

ZONING CHANGE APPLICATION FORM ATTACHMENT

Ordinance requirements dictate that the petitioner shall file a list of the names and **mailing** address of **all property** owners within three hundred (**300**) feet of the subject property boundaries (**including** vacant lands **and** lands located across streets) at the time the application is submitted to the Planning and Zoning Division. If more space is needed, please attach additional sheets.

PLEASE PRINT LEGIBLY

_____	_____
Owners Name	File Number

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Petitioners Name (if different from above) or Agent

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code

Name

_____	_____	_____	_____
Mailing Address	City	State	Zip Code